

West Virginia Personal Care Program Monitoring Tool

Agency Name:	Provider Number:
Review Period:	

SITE REVIEW	Y	N	NA	COMMENTS	MANUAL REFERENCE
Have a business license issued by the state and federal tax ID number?					517.5A
Is there a physical facility site?					517.5B
Is the office open to the public per policy?					517.5B3
Is the office handicapped accessible?					517.5B2
Does the office serve no more than eight contiguous counties?					517.4F
Is there a roster of trained staff available for county served?					517.4F
Were member records made readily available upon request?					517.4E
Does the office have an individual telephone number?					517.5C
Is there adequate, safe, and confidential space for member records?					517.5.B4
Are all member records from counties served available?					517.5.D

West Virginia Personal Care Program Monitoring Tool

Agency Name:	Provider Number:
Review Period:	

Are there adequate qualified personnel who meet minimum criteria and licensure and/or other credentialing and training requirements?					517.4B
<ul style="list-style-type: none"> Number of Professional Staff? 					
<ul style="list-style-type: none"> Number of Non-Professional Staff? 					
Is there a current Organizational Chart with names of Board of Directors and list of staff?					517.4C
Other:					